

Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

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1. Agency Name

City of San Jose

Division, Department, or Region (if applicable)

City Manager's Office

Designated Agency Contact (Name, Title)

David Sykes, City Manager

Area Code/Phone Number

(408) 535-8100

E-mail

webmaster.manager@sanjoseca.gov

Date Stamp

2019 FEB 28 PM 2:40

California  
Form

802

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: \_\_\_\_\_  
(month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ \$250.00

Event Description: Cirque Du Soleil Volta Date(s) 2 / 13 / 19  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Cirque Du Soleil  
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: \_\_\_\_\_  
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
	See attached list	20	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Honored guest at the San Jose Premiere of Volta
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

D. Sykes D. SYKES CITY MANAGER 2/28/19  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: \_\_\_\_\_

**Cirque Du Soleil Volta**  
**City of San José Attendees**  
**2/13/2019**

<b><u>Last Name</u></b>	<b><u>First Name</u></b>	<b><u>Qty of Tickets</u></b>
Hadnot	Rhonda	1
Opsal	Shelley	1
Jones	Chappie	2
Jimenez	Sergio	2
Peralez	Raul	2
Diep	Lan	2
Alanis	Diana	2
Esparza	Maya	2
Arenas	Sylvia	2
Foley	Pam	2
Khamis	Johnny	2